

EXHIBIT 65

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Genoveva hugo Vázquez
Participant's Address: Box 178 Cabo Rojo, P.R. 00623
Participant's Email Address: N/A
Name of Counsel: Departamento Educación de P.R.
Address of Counsel: San Juan, P.R.
Email Address of Counsel: _____

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 167 736
Nature of Claim: Some money was sent to teachers additional of law signed of that time. I not received this money.

By: Genoveva hugo Vázquez
Signature

Genoveva hugo Vázquez
Print Name

Title (if Participant is not an individual)

August 5 - 2020
Date

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Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

I Certify that I worked with Department of education
for 38 years from 1961-1999 from I retired.

During the government of the governor Hon.
Carlos Romero Barcelo some money additional
was sent to teachers by of a law signed
in that time. Unfortunately some teachers
did not received myself included. Consequently
my claim to which I am ~~em~~on entitled.

Thank you for your attention of my case.

Genaro Lugo Vázquez

signature

Genoveva hugo Vázquez
Box 178
Cabo Rojo, P.R. 00623

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Prime Clerk LLC
Grand Central Station
P.O. Box 4850
New York, N.Y. 10163-4850

10163-485050

